
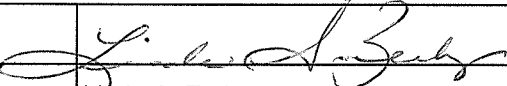


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|---|----------------------|-------------------------|----------------------|
| <b>TRANSMITTAL<br/>FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number   | 10/724,857              |                      |
|   | Filing Date          | December 1, 2003        |                      |
|   | First Named Inventor | Donald E. Frail, et al. |                      |
|   | Art Unit             | 1626                    |                      |
|   | Examiner Name        | Shirley V. Gembeh       |                      |
| Total Number of Pages in This Submission  | 12                   | Attorney Docket Number  | PC27833A (01459.US1) |

| ENCLOSURES (Check all that apply)   |   |   |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/<br>Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts<br>under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC<br>(Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please identify<br>below): |
| Remarks<br>Authorization to charge the fee and any additional fees as necessary or credit<br>any overpayment to Deposit Account Pfizer Inc is hereby given.   |   |   |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |          |        |
|--|---|----------|--------|
| Firm Name                                  | Pfizer Inc  |          |        |
| Signature                                  |  |          |        |
| Printed name                               | David R. Kurlandsky   |          |        |
| Date                                       | 9/28/06   | Reg. No. | 41,505 |

| CERTIFICATE OF TRANSMISSION/MAILING   |   |      |           |
|---|---|------|-----------|
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| Typed or printed name   | Linda A. Zerby  | Date | 9/28/2006 |

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